	4-16-09	·		D-PART	_	dumn 2)	•	SMALL	EMITY		OTHE	R TH
total claims 23			3				7	RATE	FEE		RATE	_
FOR			, MANUE	MAKBERFLED		MUMBER EXTRA		BASIC FI		-	BASC FE	F 771
TOTAL CHARGEABLE CLAIMS			s 23	23 minus 20»		3	1	XS 9=	1	OF	-	1
INDEPENDENT CLAIMS			4	4 iminus 3 •		• ./		X43•	+	4"	1	-
i	MULTIPLE DEP	ENDENT CLAIM	PRESENT	TESENT 🔲			1		<del> </del>	-JOA	X86-	├
•	If the differen	ce in column 1	is less than	zero, enter	TO" in	column 2		+1450		JOR	1290:	_
						-		TOTAL	L	OR	TOTAL	9/0.
•	3-28-00	(Column 1	)	(Colum	ın 2)	(Column 3	<u> </u>	SMALL	ENTITY	QR.	SMALL!	
		REMAINING AFTER AMENDMENT	- 1	HIGHE MUMB PREVIOU PAID P	er USLY	PRESENT EXTRA		RATE	ADD. TIC::		PATE	AD
ì		1.23	Minus	-2:	3	. 0	1	X5 9.	F .	OR	X\$18=	FE
	Independent	1. 4	Minus	- 4		- 0	lt	X43=	-		X86=	+
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-1:5s	-	OR	+250=	<b>-</b> ₩
	(-27-DU (Cotumn 1) (Column 2) (Column 3						L A	1014L 03:1 FBE		OR	TOTAL LODIT, FEE	
		REMAINING AFTER AMENDMENT		MIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TION/ * FEE	] [	RATE	ADD TION FEE
	Total	- 23	Minus	-23		- 0		XS 9=		OR	XS18=	\ .
	Independent FIRST PRESE	NTATION OF M	Minus	- Y		· 0.	T	X43≖.	•	OR	X86=	1
		The state of the s	OCH CE DE	- SANENI CI	LAIM		1	145=		OR	+290=	X
1	n/W/AC		•					TOTAL OIT, FEE			TOTAL DOTT. FEE	
	7710,0	(Column 1) CLAIMS	• • •	(Column	_	(Column 3)	نــ					
		AFTER AMENOMENT		PRIEVIOUS PAID FOI	i LY	PRESENT EXTRA	Ŀ		ADDI- IONAL FEE		PATE 1	ADD TION
	Total Independent	.23	Minus	- 2	3		,	CS 9=		OR	X\$18=	
		NTATION OF MU	Minus LTIPLE DEF	ENDENT/CI			[;	(43-		OR	X86=	
							Γ.	145=		·	-290=	
	•		If the entry is column 1 is leas than the entry in column 2, write "O" is column 3.  If the "rilginus histonic internously Maid Fee" IN THOS SPACE is less than 20, error "20."  The "Highest Number Praylocally Paid Fee" IN THOS SPACE is less than 3, error "3."  The "Highest Number Residently Paid Fee" IN THOS SPACE is less than 3, error "3."									